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RICHARD W. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

*JW 3*

*Rebecca Cohn (D)*

*in(3) three days not Received Return to below address:*

SAN JOSE CA 951

NOT DELIVERABLE  
NO RETURN ADDRESS  
UNDELIVERABLE TO FORWARD

*Rebecca Cohn (D)*  
*01 Campbell Way #300*  
*Campbell, CA 95008*

14 in (3) three days not Received Return to below address:

Rebecca Cohn (D)

Field Rep. Nicole Harrea,

101 Campisi Way #308

Campbell, Calif. 95008.

SAN JOSE CA 951

30 JAN 2008

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JAN 31 2008

RICHARD W. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

PERGAL MAIL

TO: THE CLERK OF THE  
COURT,  
U.S. Federal Court of  
The Northern District  
of Calif. Hon. Seeborg  
450 Golden Gate Ave.  
San Francisco, Calif. 94102.

FEB - 5 2008.

RICHARD W. WIEKING  
CLERK, U.S. DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

TO THE CLERK OF THE COURT, OF THE  
UNITED STATES FEDERAL COURT FOR THE  
NORTHERN DISTRICT OF CALIFORNIA.  
450 Golden Gate Avenue. San Francisco, California.  
94102. Hon. Richard Seeborg, #: 5:06-CV-00069 JW  
filed date: 01/09/06.

E-filing

CV 08 0803

JW (PR)

Appellant

Raul Rivera, Chavez, "Self," Colin, Counsel,

Docket:

vs.  
People of State of California, Bill Lockyer,Superior Court No. 159787, CC330619,  
CC788137/9280099-9176541Board of Prison Terms, Superior Court of  
Santa Clara, RespondentsPetition-Statement;  
Writ of Mandate, attached;  
Statement. Date: Jan. 19th 2008.

I Raul R. Chavez, the Pationer and Defendant in the above-caption case,  
state: that in the action entitled: People of The State of California vs.  
Raul, Rivera, Chavez, Criminal Action No. CC788137. The Respondent in  
the Superior Court of The County of Santa Clara.

Grounds for which I seek releif On: Jan. 9th 08. I motion Judge-  
Nadler of Breech of Duty by counsel: J. Delgado, for Subpoena of  
Written Police Reports. Majistrate made comment counsel don't ha-  
ve to obtain anything. She, counsel. stated: she get Abstract of Jud-  
gemet Computer Printed Reproduction Offical Record for Pre-Lim.  
On: Jan. 10-08. I waived Marsden Motion-disqualify counsel. made Prior  
day I let counsel know that on: Judge May 10-21-92. Feloney Minut-  
es Committment Certification Term of 10 Mth's Top/Bottom, No lo-  
Contender P.C. §42.29 Conditional Plea Agreement Sentencing Pr-  
oceedures §91.20 [e] n17 Yet on: Record states P.C. §288(a) oral co-  
pulation. This is not my Charge and I was not required to Regest-  
er P.C. §290. my matter acusation L.&L., No Physical Evidence §91.21 [2].  
violated; waived formal Probation Report. "Credits Only Agree-me-  
nt. at: Final Judgement on: 11-13-92. concerning §91.20 [e] n118 Req-  
uest to Pull Plea Back. denied also, Courts had Sealed my Case.  
also on: 10th of Jan. 08. Delgado stated Court Record Reporter;  
"Sandy Ney" didn't error Penal Code stated with small (a) was L.&L.  
On: Dec. 4th 07. Granted Faretta Waiver. filed in Triplicate: CR-125/JV-

**UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF CALIFORNIA**

FEB - 5 2008

Dear Sir or Madam:

Your complaint has been filed as civil case number

CV 08 0803 JW

✓ A filing fee of \$350.00 is now due. If you are unable to pay the entire filing fee at this time, you must sign and complete this court's Prisoner's In Forma Pauperis Application in its entirety. If the application is granted, you will not have to prepay the fee, but it will be taken out of income to your prisoner account in installments.

(PR)

Your complaint is deficient because you did not pay the filing fee and:

E-filing

1. ✓ you did not file an In Forma Pauperis Application.
2. \_\_\_\_ the In Forma Pauperis Application you submitted is insufficient because:

\_\_\_\_ You did not use the correct form. You must submit this court's current Prisoner's In Forma Pauperis Application.

\_\_\_\_ Your In Forma Pauperis Application was not completed in its entirety.

\_\_\_\_ You did not sign your In Forma Pauperis Application.

\_\_\_\_ You did not submit a Certificate of Funds in Prisoner's Account completed and signed by an authorized officer at the prison.

\_\_\_\_ You did not attach a copy of your prisoner trust account statement showing transactions for the last six months.

\_\_\_\_ Other \_\_\_\_\_

Enclosed you will find this court's current Prisoner's In Forma Pauperis Application, which includes a Certificate of Funds in Prisoner's Account form, and a return envelope for your convenience.

**Warning: YOU MUST RESPOND TO THIS NOTICE.** If you do not respond within **THIRTY DAYS** from the filing date stamped above, your action will be **DISMISSED**, the file closed and the entire filing fee will become due immediately. Filing a prisoner's In Forma Pauperis Application will allow the court to determine whether installment payment of the filing fee should be allowed.

Sincerely,  
RICHARD W. WIEKING, Clerk,

By \_\_\_\_\_  
Deputy Clerk

CHANGZ

UNITED STATES DISTRICT COURT  
FOR THE NORTHERN DISTRICT OF CALIFORNIA

**INSTRUCTIONS FOR PRISONER'S  
IN FORMA PAUPERIS APPLICATION**

You must submit to the court a completed Prisoner's In Forma Pauperis Application if you are unable to pay the entire filing fee at the time you file your complaint or petition. Your application must include copies of the prisoner trust account statement showing transactions for the last six months and a certificate of funds in prisoner's account, signed by an authorized officer of the institution.

**A. Non-habeas Civil Actions**

Effective April 9, 2006, the filing fee for any civil action other than a habeas is \$350.00. Even if you are granted leave to proceed in forma pauperis, you must still pay the full amount of the court's filing fee, but the fee will be paid in several installments. 28 U.S.C. § 1915.

You must pay an initial partial filing fee of 20 percent of the greater of (a) the average monthly deposits to your account for the 6-month period immediately before the complaint was filed or (b) the average monthly balance in your account for the 6-month period immediately before the complaint was filed. The court will use the information provided on the certificate of funds and the trust account statement to determine the filing fee immediately due and will send instructions to you and the prison trust account office for payment if in forma pauperis status is granted.

After the initial partial filing fee is paid, your prison's trust account office will forward to the court each month 20 percent of the most recent month's income to your prison trust account, to the extent the account balance exceeds ten dollars (\$10.00). Monthly payments will be required until the full filing fee is paid. If you have no funds over ten dollars (\$10.00) in your account, you will not be required to pay part of the filing fee that month.

If your application to proceed in forma pauperis is granted, you will be liable for the full \$350.00 filing fee even if your civil action is dismissed. That means the court will continue to collect payments until the entire filing fee is paid. However, if you do not submit this completed application the action will be dismissed without prejudice and the filing fee will not be collected.

**B. Habeas Actions**

The filing fee for a habeas action is \$5.00. If you are granted leave to proceed in forma pauperis you will not be required to pay any portion of this fee. If you are not granted leave to proceed in forma pauperis you must pay the fee in one payment and not in installments. If you use a habeas form to file a non-habeas civil action, you will be required to pay the \$350.00 filing fee applicable to all non-habeas civil actions.

E-filing

UNITED STATES DISTRICT COURT  
NORTHERN DISTRICT OF CALIFORNIA

Plaintiff,

vs.

Defendant.

CV 08

CASE NO.

0803

PRISONER'S  
APPLICATION TO PROCEED  
IN FORMA PAUPERIS

JW

(PR)

I, \_\_\_\_\_, declare, under penalty of perjury that I am the plaintiff in the above entitled case and that the information I offer throughout this application is true and correct. I offer this application in support of my request to proceed without being required to prepay the full amount of fees, costs or give security. I state that because of my poverty I am unable to pay the costs of this action or give security, and that I believe that I am entitled to relief.

In support of this application, I provide the following information:

1. Are you presently employed? Yes \_\_\_\_ No \_\_\_\_

If your answer is "yes," state both your gross and net salary or wages per month, and give the name and address of your employer:

Gross: \_\_\_\_\_ Net: \_\_\_\_\_

Employer: \_\_\_\_\_

1 If the answer is "no," state the date of last employment and the amount of the gross and net  
 2 salary and wages per month which you received. (If you are imprisoned, specify the last  
 3 place of employment prior to imprisonment.)

4 \_\_\_\_\_  
 5 \_\_\_\_\_  
 6 \_\_\_\_\_

7 2. Have you received, within the past twelve (12) months, any money from any of the  
 8 following sources:

9 a. Business, Profession or Yes \_\_\_\_ No \_\_\_\_  
 10 self employment

11 b. Income from stocks, bonds, Yes \_\_\_\_ No \_\_\_\_  
 12 or royalties?

13 c. Rent payments? Yes \_\_\_\_ No \_\_\_\_

14 d. Pensions, annuities, or Yes \_\_\_\_ No \_\_\_\_  
 15 life insurance payments?

16 e. Federal or State welfare payments, Yes \_\_\_\_ No \_\_\_\_  
 17 Social Security or other govern-  
 18 ment source?

19 If the answer is "yes" to any of the above, describe each source of money and state the amount  
 20 received from each.

21 \_\_\_\_\_  
 22 \_\_\_\_\_

23 3. Are you married? Yes \_\_\_\_ No \_\_\_\_

24 Spouse's Full Name: \_\_\_\_\_

25 Spouse's Place of Employment: \_\_\_\_\_

26 Spouse's Monthly Salary, Wages or Income:

27 Gross \$ \_\_\_\_\_ Net \$ \_\_\_\_\_

28 4. a. List amount you contribute to your spouse's support: \$ \_\_\_\_\_



- 1           b.     List the persons other than your spouse who are dependent upon you for  
 2                 support and indicate how much you contribute toward their support. (NOTE:  
 3                 For minor children, list only their initials and ages. DO NOT INCLUDE  
 4                 THEIR NAMES.).

5 \_\_\_\_\_  
 6 \_\_\_\_\_  
 7 5.     Do you own or are you buying a home?                 Yes \_\_\_\_ No \_\_\_\_

8 Estimated Market Value: \$ \_\_\_\_\_ Amount of Mortgage: \$ \_\_\_\_\_

9 6.     Do you own an automobile?                                 Yes \_\_\_\_ No \_\_\_\_

10 Make \_\_\_\_\_ Year \_\_\_\_\_ Model \_\_\_\_\_

11 Is it financed? Yes \_\_\_\_ No \_\_\_\_ If so, Total due: \$ \_\_\_\_\_

12 Monthly Payment: \$ \_\_\_\_\_

13 7.     Do you have a bank account? Yes \_\_\_\_ No \_\_\_\_ (Do not include account numbers.)

14 Name(s) and address(es) of bank: \_\_\_\_\_

15 \_\_\_\_\_

16 Present balance(s): \$ \_\_\_\_\_

17 Do you own any cash? Yes \_\_\_\_ No \_\_\_\_ Amount: \$ \_\_\_\_\_

18 Do you have any other assets? (If "yes," provide a description of each asset and its estimated  
 19 market value.) Yes \_\_\_\_ No \_\_\_\_

20 \_\_\_\_\_

21 8.     What are your monthly expenses?

22 Rent: \$ \_\_\_\_\_ Utilities: \_\_\_\_\_

23 Food: \$ \_\_\_\_\_ Clothing: \_\_\_\_\_

24 Charge Accounts:

25 <u>Name of Account</u>	<u>Monthly Payment</u>	<u>Total Owed on This Acct.</u>
26 _____	\$ _____	\$ _____
27 _____	\$ _____	\$ _____
28 _____	\$ _____	\$ _____



1 9. Do you have any other debts? (List current obligations, indicating amounts and to  
2 whom they are payable. Do not include account numbers.)  
3 \_\_\_\_\_  
4 \_\_\_\_\_

5 10. Does the complaint which you are seeking to file raise claims that have been presented  
6 in other lawsuits? Yes \_\_\_\_ No \_\_\_\_

7 Please list the case name(s) and number(s) of the prior lawsuit(s), and the name of the court in  
8 which they were filed.  
9 \_\_\_\_\_  
10 \_\_\_\_\_

11 I consent to prison officials withdrawing from my trust account and paying to the court  
12 the initial partial filing fee and all installment payments required by the court.

13 I declare under the penalty of perjury that the foregoing is true and correct and  
14 understand that a false statement herein may result in the dismissal of my claims.  
15 \_\_\_\_\_

16 \_\_\_\_\_  
17 DATE

18 \_\_\_\_\_  
19 SIGNATURE OF APPLICANT  
20  
21  
22  
23  
24  
25  
26  
27  
28

Case Number: \_\_\_\_\_

**CERTIFICATE OF FUNDS**  
**IN**  
**PRISONER'S ACCOUNT**

I certify that attached hereto is a true and correct copy of the prisoner's trust account statement showing transactions of \_\_\_\_\_ for the last six months  
[prisoner name]  
\_\_\_\_\_ where (s)he is confined.

[name of institution]  
I further certify that the average deposits each month to this prisoner's account for the most recent 6-month period were \$ \_\_\_\_\_ and the average balance in the prisoner's account each month for the most recent 6-month period was \$ \_\_\_\_\_.

Dated: \_\_\_\_\_

\_\_\_\_\_  
[Authorized officer of the institution]